


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 08:00 A
Secretary of State

DOCUMENT # N03000006876	
1. Entity Name NEW HOPE MISSIONARY BAPTIST CHURCH OF ENGLEWOOD, INC.	

Principal Place of Business 2100 HWY 776 ENGLEWOOD, FL 34223	Mailing Address 2100 HWY 776 ENGLEWOOD, FL 34223
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04282007 No Chg-NP CR2E037 (4/06)

4. FEI Number 36-4552901	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEGROW, ANNIE J
 1469 E MANASOTA BEACH RD
 ENGLEWOOD, FL 34223

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$81.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ADAMS, ERNEST 7388 MITCHELL ST ENGLEWOOD, FL 34224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LIVLER, PAULA 7436 QUAKER ST ENGLEWOOD, FL 34224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DEGROW, ANNIE J 1469 E MANASOTA BEACH RD ENGLEWOOD, FL 34224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REVELS, ERNEST 1295 SORRENTO WOODS BLVD NOKOMIS, FL 34275
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATES, JIM 1617 BANYAN DR VENICE, FL 34293
TITLE NAME STREET ADDRESS CITY-ST-ZIP	I ULAVER, CARL 1424 KEY WAY ROAD ENGLEWOOD, FL 34223

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 05/23/07-80083-013 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Annie J Degrow 04/29/2007 941-474-4754
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #